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TRANSMITTAL FORM  (to be used for all correspondence after initial filing)		Application No.  Filing Date  First Named Inventor  Art Unit  Examiner Name	10/659,958  September 10, 2003  Jiann-Chang Lo  2828			
Total Number of Pages in This Submiss	Attorney Docket Number	Marcia A. Golub 42P15593				
ENCLO	SURES (chec	k all that apply)				
Fee Transmittal Form  Fee Attached  Amendment / Response  After Final Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement PTO/SB/08  Certified Copy of Priority Document(s)  Response to Missing Parts/	Drawing(s)  Licensing-related Papers  Petition  Petition to Convert a Provisional Application  Power of Attorney, Revocation Change of Correspondence Address  Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on CD		After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below):  -Response to Restriction Requirement -Return postcard			
Response to Missing Parts/ Incomplete Application  Basic Filing Fee  Declaration/POA  Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	ATTORNEY OR AC	\			
	E OF APPLICAT	NT, ATTORNEY, OR AC	3EN	11		
or	Gregory D. Caldwell, Reg. No. 39,926  BLAKELY SOKOLOFF, TAYLOR & ZAFMAN LLP					
Signature						
Date March 27, 200	March 27, 2006					

## **CERTIFICATE OF MAILING/TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with

sufficient postage as first cla 1450, Alexandria, VA 22313	ass mail in an envelope addressed to: Mail Stop An 3-1450.	nendment, Commiss	sioner for Patents, P.O. Box
Typed or printed name	Katherine Jennings		
Signature	Mitherway (mmga	Date	March 27, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Solokoff, Taylor & Zafman (wt) 11/30/2005. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

for FY 2005 Complete if Known Application Number 10/659,958 Filing Date September 10, 2003 First Named Inventor Jiann-Chang Lo Patent fees are subject to annual revision. **Examiner Name** Marcia A. Golub Applicant claims small entity status. See 37 CFR 1.27. 2828 Art Unit **TOTAL AMOUNT OF PAYMENT** (\$) 120.00 42P15593 Attorney Docket No.

METHOD OF PAYMENT (check all that apply)						
★ Check						
Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below  Charge any additional fee(s) or underpayment of fee(s)  Credit any overpayments  under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.						
FEE CALCULATION						
Large Entity Small Entity						
Fee	,					
Code (\$) Code (\$) Fee Description Fee Paid	i					
1051 130 2051 65 Surcharge - late filing fee or oath						
1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.						
2053 130 2053 130 Non-English specification						
1251 120 2251 60 Extension for reply within first month 120.0	Ō					
1252 450 2252 225 Extension for reply within second month						
1253 1,020 2253 510 Extension for reply within third month						
1254 1,590 2254 795 Extension for reply within fourth month						
1255 2,160 2255 1,080 Extension for reply within fifth month						
1401 500 2401 250 Notice of Appeal						
1402 500 2402 250 Filing a brief in support of an appeal						
1403 1,000 2403 500 Request for oral hearing						
1451 1,510 2451 1,510 Petition to institute a public use proceeding						
1460 130 2460 130 Petitions to the Commissioner						
1807 50 1807 50 Processing fee under 37 CFR 1.17(q)						
1806 180 1806 Submission of Information Disclosure Stmt						
1809 790 1809 395 Filing a submission after final rejection (37 CFR § 1.129(a))						
1810 790 2810 395 For each additional invention to be examined (37 CFR § 1.129(b))						
Other fee (specify)						
SUBTOTAL (2) (\$) 120.0	O					
SUBMITTED BY Complete (if applicable)						

SUBMITTED BY			Complete (if applicable)			
Name (Print/Type)			gistration No. orney/Agent)	39,926	Telephone	(503) 439-8778
Signature		<del></del>		- <del>-</del>	Date	03/27/06